

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000039616

FILED
Jan 10, 2007
Secretary of State

Entity Name: UNLIMITED DEVELOPMENT GROUP, INC.

Current Principal Place of Business:

119 MARION OAKS BLVD.
SUITE 600
OCALA, FL 34471

New Principal Place of Business:

119 MARION OAKS BLVD.
SUITE B
OCALA, FL 34471

Current Mailing Address:

119 MARION OAKS BLVD.
SUITE 600
OCALA, FL 34471

New Mailing Address:

119 MARION OAKS BLVD.
SUITE B
OCALA, FL 34471

FEI Number: 43-2019717

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMOS, RAUL
119 MARION OAKS BLVD UNIT B
OCALA, FL 34471 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RAMOS, RAUL
Address: 3565 SW 150TH LANE RD
City-St-Zip: OCALA, FL 34473

Title: VD () Delete
Name: HART, JERRY
Address: 9281 WEST ANTHONY ROAD
City-St-Zip: OCALA, FL 34479

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAUL RAMOS

PD

01/10/2007

Electronic Signature of Signing Officer or Director

Date